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CONFIRMATION NO. 1517

SERIAL NUMBER 09/902,736	FILING DATE 07/10/2001 RULE	CLASS 435	GROUP ART UNIT 1646	ATTORNEY DOCKET NO. P1618P2C45
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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/665,350 09/18/2000  
 and claims benefit of 60/059,115 09/17/1997  
 and claims benefit of 60/059,184 09/17/1997  
 and claims benefit of 60/059,122 09/17/1997  
 and claims benefit of 60/059,117 09/17/1997  
 and claims benefit of 60/059,113 09/17/1997  
 and claims benefit of 60/059,121 09/17/1997  
 and claims benefit of 60/059,119 09/17/1997  
 and claims benefit of 60/059,263 09/18/1997  
 and claims benefit of 60/059,266 09/18/1997  
 and claims benefit of 60/062,125 10/15/1997  
 and claims benefit of 60/062,287 10/17/1997  
 and claims benefit of 60/062,285 10/17/1997  
 and claims benefit of 60/063,486 10/21/1997

*and claims benefit of  
 and is a CON of PCT/US00/04414 02/22/2000  
 which is a CIP of PCT/US98/19437 09/17/1998  
 which is a CIP of PCT/US98/19330 09/16/1998  
 and claims benefit of 60/088026 06/04/1998*  
*said PCT/US98/19437  
 claims benefit of 60/066770 11/24/1997  
 and claims benefit of 60/065186 11/12/1997*

and claims benefit of 60/062,816 10/24/1997  
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 and claims benefit of 60/069,425 12/12/1997  
 and claims benefit of 60/088,026 06/04/1998  
 and claims benefit of 60/099,803 09/10/1998  
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 and claims benefit of 60/146,222 07/28/1999  
 and claims benefit of 60/143,048 07/07/1999  
 and claims benefit of 60/145,698 07/26/1999

09/16/04

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None  
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 UNITED STATES OF AMERICA PCT/US00/23328 08/24/2000

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11/16/04

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/20/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <i>Examiner's Signature</i> Initials	CA	124	6	1

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## TITLE

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